

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

New Millennium PAC

ADDRESS (number and street)

P.O. Box 632

☐Check if different
than previously
reported. (ACC)

Union City

NJ

07087

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00349233

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☒October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2008

through

09

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Abraham Antun

Signature of Treasurer

Electronically Filed by Abraham Antun

Date

10

15

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
New Millennium PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		198653.08
(b) Cash on Hand at Beginning of Reporting Period	267280.98	
(c) Total Receipts (from Line 19)	53604.68	218121.94
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	320885.66	416775.02
7. Total Disbursements (from Line 31)	103044.66	198934.02
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	217841.00	217841.00
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
New Millennium PAC

Report Covering the Period:

From:

M M D D Y Y W Y
0 7 0 1 2 0 0 8

To:

M M D D Y Y W Y
0 9 3 0 2 0 0 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	14455.59	148655.59
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	14455.59	148655.59
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	0.00	0.00
(b) Political Party Committees	39000.00	69000.00
(c) Other Political Committees (such as PACs)	53455.59	217655.59
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	149.09	466.35
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	53604.68	218121.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	53604.68	218121.94

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	33044.66	69934.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	33044.66	69934.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	70000.00	129000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C. 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	103044.66	198934.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	103044.66	198934.02

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	53455.59	217655.59
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	53455.59	217655.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	33044.66	69934.02
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	33044.66	69934.02

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 37

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
New Millennium PAC

A.

Full Name (Last, First, Middle Initial)
Amador Dean Aguillen

Mailing Address PO Box 15506

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer
Oglivy Government Relations

Occupation
Sr. Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1477.80

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 0 8

Transaction ID: C1758

Amount of Each Receipt this Period

1477.80

* In-Kind: Catering

B.

Full Name (Last, First, Middle Initial)
Nooshen Amiri

Mailing Address 20 Royal Dominion Ct.

City State Zip Code
Bethesda MD 20817

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 0 8

Transaction ID: C1730

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)
Moses Boyd

Mailing Address 3440 Diehl Ct.

City State Zip Code
Falls Church VA 22041

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Washington Group

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C1743

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

4477.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 37

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

Richard Clark

Mailing Address 5875 Hickory Hollow Lane

City

Doylestown

State

PA

Zip Code

18901

FEC ID number of contributing
federal political committee.

C

Name of Employer
Merck

Occupation

Chairman, President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 3 / 2 0 0 8

Transaction ID: C1731

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Andrew Kauders

Mailing Address 1735 New Hampshire Avenue , NW
#202

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Podesta Group

Occupation

Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C1742

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Moses Mercado

Mailing Address 1333 Constitution Ave., NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Insurance Associ-
ation

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1477.79

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 0 8

Transaction ID: C1759

Amount of Each Receipt this Period

1477.79

* In-Kind: Catering

SUBTOTAL of Receipts This Page (optional)

7477.79

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 37

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

Cynthia O'Hanlon

Mailing Address 45 Carroll Street

City

Falmouth

State

ME

Zip Code

04105

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Homemaker

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	8

Transaction ID: C1744

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

14455.59

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 37

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Millennium PAC

A.

Full Name (Last, First, Middle Initial)
AIRCRAFT OWNERS AND PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 421 Aviation Way

City State Zip Code
Frederick MD 21701

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C1746

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
American Bankers Association PAC

Mailing Address 1120 Connecticut Avenue, NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00016386

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 9 / 2 0 0 8

Transaction ID: C1727

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)
American Bankers Association PAC

Mailing Address 1120 Connecticut Avenue, NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00016386

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C1745

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 37

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 325 Seventh Street NW
Suite 700

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00106146

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C1740

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

FMR LLC POLITICAL ACTION COMMITTEE (FIDELITY PAC)

Mailing Address 82 Devonshire Street

City State Zip Code
Boston MA 02109

FEC ID number of contributing
federal political committee.

C C00215046

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C1734

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Int'l Brotherhood of Electrical Workers COPE

Mailing Address 900 Seventh St. N.W.

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C C00027342

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C1735

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 37

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

National Association of Real Estate Investment Trusts Inc. PAC

Mailing Address 1875 Eye Street NW
Suite 600

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee.

C C00303339

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 9 / 2 0 0 8

Transaction ID: C1728

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

NOVO NORDISK INC. POLITICAL ACTION COMMITTEE

Mailing Address 500 New Jersey Avenue NW
Suite 350

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C C00424838

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C1739

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Pfizer PAC

Mailing Address 235 East 42nd St.

City State Zip Code
New York NY 10017

FEC ID number of contributing
federal political committee.

C C00016683

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C1736

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 37

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE

Mailing Address 1750 New York Avenue NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.**C** C00007542

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	8

Transaction ID: C1737

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

SMITHKLINE BEECHAM CORPORATION POLITICAL ACTION CO

Mailing Address Five Moore Drive
P.O. Box 13358

City

Res. Triangle Park

State

NC

Zip Code

27709

FEC ID number of contributing
federal political committee.**C** C00199703

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	8

Transaction ID: C1741

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

TREA SENIOR CITIZENS LEAGUE INC. POLITICAL ACTION COMMITTEE (TSCL-PAC)

Mailing Address 909 North Washington Street
Suite 300

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.**C** C00327064

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	8

Transaction ID: C1738

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 37

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

UBS AMERICAS FUND FOR BETTER GOVERNMENT

Mailing Address 1285 AVENUE OF THE AMERICAS

City

NEW YORK

State

NY

Zip Code

10019

FEC ID number of contributing
federal political committee.**C** C00012245

Name of Employer

Occupation

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	0	8

Transaction ID: C1729

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

39000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 37

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

Lakeland Bank

Mailing Address 250 Oak Ridge Road

City

Oak Ridge

State

NJ

Zip Code

07438

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

466.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 1 / 2 0 0 8

Transaction ID: C1732

Amount of Each Receipt this Period

52.30

* Interest

B.

Full Name (Last, First, Middle Initial)

Lakeland Bank

Mailing Address 250 Oak Ridge Road

City

Oak Ridge

State

NJ

Zip Code

07438

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

466.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: C1733

Amount of Each Receipt this Period

47.61

* Interest

C.

Full Name (Last, First, Middle Initial)

Lakeland Bank

Mailing Address 250 Oak Ridge Road

City

Oak Ridge

State

NJ

Zip Code

07438

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

466.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Transaction ID: C1757

Amount of Each Receipt this Period

49.18

* Interest

SUBTOTAL of Receipts This Page (optional)

149.09

TOTAL This Period (last page this line number only)

149.09

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

1100 Valley Brook Ave. LLC

Mailing Address 1100 Valley Brook Ave.

City Lyndhurst State NJ Zip Code 07071

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2188

Date of Disbursement

08 / 01 / 2008

Amount of Each Disbursement this Period

919.04

B.

Full Name (Last, First, Middle Initial)

1100 Valley Brook Ave. LLC

Mailing Address 1100 Valley Brook Ave.

City Lyndhurst State NJ Zip Code 07071

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2207

Date of Disbursement

09 / 04 / 2008

Amount of Each Disbursement this Period

919.04

C.

Full Name (Last, First, Middle Initial)

Amador Dean Aguillen

Mailing Address PO Box 15506

City Washington State DC Zip Code 20003

Purpose of Disbursement
In-Kind Contribution: Catering

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2259

Date of Disbursement

09 / 24 / 2008

Amount of Each Disbursement this Period

1477.80

* in-kind received

SUBTOTAL of Disbursements This Page (optional)

3315.88

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial) Ceridian Mailing Address PO Box 2021	Transaction ID: D2171 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 3 / 2 0 0 8</div> </div>
City Pine Brook State NJ Zip Code 07058 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>490.58</div>
B. Full Name (Last, First, Middle Initial) Ceridian Mailing Address PO Box 2021 City Pine Brook State NJ Zip Code 07058 Purpose of Disbursement Payroll Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2214 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>127.35</div>
C. Full Name (Last, First, Middle Initial) Ceridian Mailing Address PO Box 2021 City Pine Brook State NJ Zip Code 07058 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2197 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 7 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>490.61</div>

SUBTOTAL of Disbursements This Page (optional)

1108.54

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A.

Full Name (Last, First, Middle Initial)
Ceridian

Mailing Address PO Box 2021

City Pine Brook State NJ Zip Code 07058

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2198

Date of Disbursement

07 / 31 / 2008

Amount of Each Disbursement this Period

490.58

B.

Full Name (Last, First, Middle Initial)
Ceridian

Mailing Address PO Box 2021

City Pine Brook State NJ Zip Code 07058

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2201

Date of Disbursement

08 / 14 / 2008

Amount of Each Disbursement this Period

490.58

C.

Full Name (Last, First, Middle Initial)
Ceridian

Mailing Address PO Box 2021

City Pine Brook State NJ Zip Code 07058

Purpose of Disbursement

Payroll Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2215

Date of Disbursement

08 / 15 / 2008

Amount of Each Disbursement this Period

82.90

SUBTOTAL of Disbursements This Page (optional)

1064.06

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial) Ceridian	Transaction ID: D2202																				
Mailing Address	Date of Disbursement																				
PO Box 2021	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	8		2	0	0	8												
City Pine Brook	Amount of Each Disbursement this Period																				
State NJ	<table border="1"> <tr> <td colspan="10">490.58</td> </tr> </table>	490.58																			
490.58																					
Zip Code 07058	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Purpose of Disbursement	Payroll Taxes																				
Candidate Name	Office Sought: <table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Senate	<input type="checkbox"/> President																
<input type="checkbox"/> House	Disbursement For:																				
<input type="checkbox"/> Senate																					
<input type="checkbox"/> President																					
State: District:	<table border="1"> <tr> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Other (specify) ▼</td> </tr> </table>	<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Other (specify) ▼																	
<input type="checkbox"/> Primary	<input type="checkbox"/> General																				
<input type="checkbox"/> Other (specify) ▼																					
B. Full Name (Last, First, Middle Initial) Ceridian	Transaction ID: D2219																				
Mailing Address	Date of Disbursement																				
PO Box 2021	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	1		2	0	0	8												
City Pine Brook	Amount of Each Disbursement this Period																				
State NJ	<table border="1"> <tr> <td colspan="10">455.02</td> </tr> </table>	455.02																			
455.02																					
Zip Code 07058	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Purpose of Disbursement	Payroll Taxes																				
Candidate Name	Office Sought: <table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Senate	<input type="checkbox"/> President																
<input type="checkbox"/> House	Disbursement For:																				
<input type="checkbox"/> Senate																					
<input type="checkbox"/> President																					
State: District:	<table border="1"> <tr> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Other (specify) ▼</td> </tr> </table>	<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Other (specify) ▼																	
<input type="checkbox"/> Primary	<input type="checkbox"/> General																				
<input type="checkbox"/> Other (specify) ▼																					
C. Full Name (Last, First, Middle Initial) Ceridian	Transaction ID: D2251																				
Mailing Address	Date of Disbursement																				
PO Box 2021	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	5		2	0	0	8												
City Pine Brook	Amount of Each Disbursement this Period																				
State NJ	<table border="1"> <tr> <td colspan="10">82.90</td> </tr> </table>	82.90																			
82.90																					
Zip Code 07058	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Purpose of Disbursement	Payroll Services																				
Candidate Name	Office Sought: <table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Senate	<input type="checkbox"/> President																
<input type="checkbox"/> House	Disbursement For:																				
<input type="checkbox"/> Senate																					
<input type="checkbox"/> President																					
State: District:	<table border="1"> <tr> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Other (specify) ▼</td> </tr> </table>	<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Other (specify) ▼																	
<input type="checkbox"/> Primary	<input type="checkbox"/> General																				
<input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional)

1028.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial) Ceridian <hr/> Mailing Address PO Box 2021	Transaction ID: D2222 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	5		2	0	0	8												
City Pine Brook State NJ Zip Code 07058 Purpose of Disbursement Payroll Taxes Candidate Name <div style="border: 1px solid black; width: 50px; height: 20px; margin: 5px auto;"></div> Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 100%; text-align: right; padding: 5px;">454.81</div>																				
B. Full Name (Last, First, Middle Initial) Evans & Katz LLC <hr/> Mailing Address 1831 Bay Street SE City Washington State DC Zip Code 20003 Purpose of Disbursement Accounting Services Candidate Name <div style="border: 1px solid black; width: 50px; height: 20px; margin: 5px auto;"></div> Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D2189 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 100%; text-align: right; padding: 5px;">2250.00</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	9		2	0	0	8												
C. Full Name (Last, First, Middle Initial) Helen Milby & Co <hr/> Mailing Address 1255 C Street, SE City Washington State DC Zip Code 20003 Purpose of Disbursement Catering Candidate Name <div style="border: 1px solid black; width: 50px; height: 20px; margin: 5px auto;"></div> Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D2225 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 100%; text-align: right; padding: 5px;">2818.50</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	6		2	0	0	8												

SUBTOTAL of Disbursements This Page (optional)

5523.31

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

Tiffani Llerandi

Mailing Address 549 E. Elizabeth Ave.

City Linden State NJ Zip Code 07036

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2170

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1187.12

B.

Full Name (Last, First, Middle Initial)

Tiffani Llerandi

Mailing Address 549 E. Elizabeth Ave.

City Linden State NJ Zip Code 07036

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2196

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1187.10

C.

Full Name (Last, First, Middle Initial)

Tiffani Llerandi

Mailing Address 549 E. Elizabeth Ave.

City Linden State NJ Zip Code 07036

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2199

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1187.12

SUBTOTAL of Disbursements This Page (optional)

3561.34

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

Tiffani Llerandi

Mailing Address 549 E. Elizabeth Ave.

City Linden State NJ Zip Code 07036

Purpose of Disbursement
Travel Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2191

Date of Disbursement

08 / 01 / 2008

Amount of Each Disbursement this Period

869.49

B.

Full Name (Last, First, Middle Initial)

Tiffani Llerandi

Mailing Address 549 E. Elizabeth Ave.

City Linden State NJ Zip Code 07036

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2200

Date of Disbursement

08 / 14 / 2008

Amount of Each Disbursement this Period

1187.13

C.

Full Name (Last, First, Middle Initial)

Tiffani Llerandi

Mailing Address 549 E. Elizabeth Ave.

City Linden State NJ Zip Code 07036

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2203

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

1187.12

SUBTOTAL of Disbursements This Page (optional)

3243.74

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

Tiffani Llerandi

Mailing Address 549 E. Elizabeth Ave.

City Linden State NJ Zip Code 07036

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2218

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1201.26

B.

Full Name (Last, First, Middle Initial)

Tiffani Llerandi

Mailing Address 549 E. Elizabeth Ave.

City Linden State NJ Zip Code 07036

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2221

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1201.35

C.

Full Name (Last, First, Middle Initial)

Tiffani Llerandi

Mailing Address 549 E. Elizabeth Ave.

City Linden State NJ Zip Code 07036

Purpose of Disbursement
Mileage Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2226

Date of Disbursement

/ /

Amount of Each Disbursement this Period

111.11

SUBTOTAL of Disbursements This Page (optional)

2513.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial) Moses Mercado	Transaction ID: D2260 Date of Disbursement																				
Mailing Address 1333 Constitution Ave., NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	4		2	0	0	8												
City Washington State DC Zip Code 20002 Purpose of Disbursement In-Kind Contribution: Catering Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">1477.70</td> </tr> </table>	1477.70																			
1477.70																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	* in-kind received																				
B. Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D2190 Date of Disbursement																				
Mailing Address P.O. Box 4890	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	1		2	0	0	8												
City Trenton State NJ Zip Code 08650 Purpose of Disbursement Telephone Service Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">123.10</td> </tr> </table>	123.10																			
123.10																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
C. Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D2208 Date of Disbursement																				
Mailing Address P.O. Box 4890	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	5		2	0	0	8												
City Trenton State NJ Zip Code 08650 Purpose of Disbursement Telephone Service Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">267.12</td> </tr> </table>	267.12																			
267.12																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional)

1867.92

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
New Millennium PAC

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address 2 North LaSalle Street

City Chicago State IL Zip Code 60202

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2247

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2008

Amount of Each Disbursement this Period

168.49

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address 2 North LaSalle Street

City Chicago State IL Zip Code 60202

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2244

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2008

Amount of Each Disbursement this Period

385.50

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Daniel O'Brien

Mailing Address 3024 Porter Street, NW
#103

City Washington State DC Zip Code 20008

Purpose of Disbursement
Travel & Meals Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2205

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2008

Amount of Each Disbursement this Period

1987.22

SUBTOTAL of Disbursements This Page (optional)

1987.22

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial) American Airlines Mailing Address PO Box 619616	Transaction ID: D2243 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 8 / 2 0 0 8</div> </div>
City Dallas State TX Zip Code 75261 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>1332.00</div> [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Tiffani Llerandi Mailing Address 549 E. Elizabeth Ave. City Linden State NJ Zip Code 07036 Purpose of Disbursement Travel & Catering Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2206 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 4 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>764.45</div>
C. Full Name (Last, First, Middle Initial) Taormina Restaurant Mailing Address 482 Boulevard City Kenilworth State NJ Zip Code 07033 Purpose of Disbursement Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2241 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 2 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>259.70</div> [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

764.45

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A.

Full Name (Last, First, Middle Initial)
The Palm - Denver

Mailing Address 1672 Lawrence Street

City State Zip Code
Denver CO 80202

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2242

Date of Disbursement

/ /

Amount of Each Disbursement this Period

228.22

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Afshin Mohamadi

Mailing Address 628 F Street, NE

City State Zip Code
Washington DC 20002

Purpose of Disbursement
Travel Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2209

Date of Disbursement

/ /

Amount of Each Disbursement this Period

410.00

C.

Full Name (Last, First, Middle Initial)
Continental Airlines

Mailing Address 1600 Smith Street

City State Zip Code
Houston TX 77002

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2258

Date of Disbursement

/ /

Amount of Each Disbursement this Period

410.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

410.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial) Tiffani Llerandi	Transaction ID: D2220 Date of Disbursement
Mailing Address 549 E. Elizabeth Ave.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 0 8</div> </div>
City Linden State NJ Zip Code 07036	Amount of Each Disbursement this Period
Purpose of Disbursement Catering Reimbursement	<div>500.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Johnny's Half Shell	Transaction ID: D2240 Date of Disbursement
Mailing Address 400 North Capitol Street, NE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 8 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period
Purpose of Disbursement Catering	<div>500.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Daniel O'Brien	Transaction ID: D2224 Date of Disbursement
Mailing Address 3024 Porter Street, NW #103	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20008	Amount of Each Disbursement this Period
Purpose of Disbursement Travel, Lodging & Supplies Reimbursement	<div>4562.51</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

5062.51

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC**A.**Full Name (Last, First, Middle Initial)
Amtrak

Mailing Address 60 Massachusetts Ave., N.E.

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2253

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	0	8

Amount of Each Disbursement this Period

356.00

[MEMO ITEM]**B.**Full Name (Last, First, Middle Initial)
Courtyard by Marriott Denver

Mailing Address 8320 S. Valley Hwy.

City Englewood State CO Zip Code 80112

Purpose of Disbursement
Lodging

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2256

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	0	8

Amount of Each Disbursement this Period

800.00

[MEMO ITEM]**C.**Full Name (Last, First, Middle Initial)
Courtyard by Marriott Denver

Mailing Address 8320 S. Valley Hwy.

City Englewood State CO Zip Code 80112

Purpose of Disbursement
Lodging

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2257

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	8

Amount of Each Disbursement this Period

1146.20

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A.

Full Name (Last, First, Middle Initial)
Fed Ex Kinko's

Mailing Address 208 Second Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Photocopying Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2252

Date of Disbursement

08 / 22 / 2008

Amount of Each Disbursement this Period

223.15

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
JW Marriott Denver

Mailing Address 150 Clayton Lane

City Denver State CO Zip Code 80206

Purpose of Disbursement
Lodging

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2254

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

1167.93

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
JW Marriott Denver

Mailing Address 150 Clayton Lane

City Denver State CO Zip Code 80206

Purpose of Disbursement
Lodging

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2255

Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

1146.20

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

32919.59

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial) AL FRANKEN FOR SENATE <hr/> Mailing Address PO BOX 583144	Transaction ID: D2210 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 9 / 2 0 0 8</div> </div>
City MINNEAPOLIS State MN Zip Code 55458 Purpose of Disbursement Contribution Candidate Name Al Franken Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>5000.00</div>
B. Full Name (Last, First, Middle Initial) AL FRANKEN FOR SENATE <hr/> Mailing Address PO BOX 583144 City MINNEAPOLIS State MN Zip Code 55458 Purpose of Disbursement Contribution Candidate Name Al Franken Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2237 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>5000.00</div>
C. Full Name (Last, First, Middle Initial) BERKOWITZ FOR CONGRESS <hr/> Mailing Address PO BOX 91365 City ANCHORAGE State AK Zip Code 99509 Purpose of Disbursement Contribution Candidate Name Ethan Berkowitz Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2233 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>2500.00</div>

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial) CAZAYOUX FOR CONGRESS	Transaction ID: D2227 Date of Disbursement
Mailing Address PO BOX 156	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 8</div> </div>
City NEW ROADS State LA Zip Code 70802	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>2500.00</div>
Candidate Name Don Cazayoux	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) CHRIS DODD FOR PRESIDENT INC	Transaction ID: D2194 Date of Disbursement
Mailing Address PO BOX 270701	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 1 / 2 0 0 8</div> </div>
City WEST HARTFORD State CT Zip Code 06127	Amount of Each Disbursement this Period
Purpose of Disbursement Contrib. -Primary Debt Retirement	<div>5000.00</div>
Candidate Name Chrs Dodd	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Dina Titus for Congress	Transaction ID: D2232 Date of Disbursement
Mailing Address 3711 East Sunset Road Suite C5	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 8</div> </div>
City Las Vegas State NV Zip Code 89120	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>2500.00</div>
Candidate Name Dina Titus	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial)
HAGAN SENATE COMMITTEE INC

Mailing Address PO BOX 29103

City Greensboro State NC Zip Code 27429

Purpose of Disbursement
Contribution

Candidate Name
Kay Hagan

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District:

Transaction ID: D2195

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
JEFF MERKLEY FOR OREGON

Mailing Address 921 SW WASHINGTON STE 470

City PORTLAND State OR Zip Code 97205

Purpose of Disbursement
Contribution

Candidate Name
Jeff Merkley

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: OR District:

Transaction ID: D2238

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
KAY FOR CONGRESS

Mailing Address PO BOX 14194

City PARKVILLE State MO Zip Code 64152

Purpose of Disbursement
Contribution

Candidate Name
Kay Barnes

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MO District: 06

Transaction ID: D2230

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial) KOSMAS FOR CONGRESS Mailing Address PO BOX 1547	Transaction ID: D2231 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 8</div> </div>
City NEW SMYRNA BEACH State FL Zip Code 32170 Purpose of Disbursement Contribution <div>Category/Type</div> Candidate Name Suzanne Kosmas Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 24	Amount of Each Disbursement this Period <div>2500.00</div>
B. Full Name (Last, First, Middle Initial) KRATOVIL FOR CONGRESS Mailing Address 222 Main Sail Drive PO Box 518	Transaction ID: D2229 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 8</div> </div>
City Stevensville State MD Zip Code 21666 Purpose of Disbursement Contribution <div>Category/Type</div> Candidate Name Frank Kratovil Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MD District: 01	Amount of Each Disbursement this Period <div>5000.00</div>
C. Full Name (Last, First, Middle Initial) Kurt Schrader for Congress Mailing Address 607 N. Main Street Suite 240	Transaction ID: D2235 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 8</div> </div>
City Oregon City State OR Zip Code 97045 Purpose of Disbursement Contribution <div>Category/Type</div> Candidate Name Kurt Schrader Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 05	Amount of Each Disbursement this Period <div>2500.00</div>

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial)
LINDA STENDER FOR CONGRESS

Mailing Address PO BOX 730

City SCOTCH PLAINS State NJ Zip Code 07076

Purpose of Disbursement
Contribution

Candidate Name
Linda Stender

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ District: 07

Transaction ID: D2211

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
LINDA STENDER FOR CONGRESS

Mailing Address PO BOX 730

City SCOTCH PLAINS State NJ Zip Code 07076

Purpose of Disbursement
Contribution

Candidate Name
Linda Stender

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ District: 07

Transaction ID: D2236

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
Martin for Senate

Mailing Address PO Box 7219

City Atlanta State GA Zip Code 30357

Purpose of Disbursement
Contribution - Runoff

Candidate Name
Jim Martin

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☐ General
☒ Other (specify) ▼

State: GA District:

Runoff

Transaction ID: D2187

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial)
MCNERNEY FOR CONGRESS

Mailing Address 6520 Village Parkway
Second Floor

City Dublin State CA Zip Code 94568

Purpose of Disbursement
Contribution

Candidate Name
Jerry McNerney

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 11

Transaction ID: D2228

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
MUSGROVE FOR U S SENATE

Mailing Address 600 CONCOURSE SUITE 100
1076 HIGHLAND COLONY PARKWAY

City RIDGELAND State MS Zip Code 39157

Purpose of Disbursement
Contribution - Sepcial General

Candidate Name
Ronnie Musgrove

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☐ General
☒ Other (specify) ▼

State: MS District: O

Transaction ID: D2193

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
Nebraskans for KleeB

Mailing Address 109 N. Hastings Avenue

City Hastings State NE Zip Code 68901

Purpose of Disbursement
Contribution

Candidate Name
Scott KleeB

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NE District:

Transaction ID: D2204

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A.

Full Name (Last, First, Middle Initial)
SCHAUER FOR CONGRESS

Mailing Address PO BOX 100

City State Zip Code
BATTLE CREEK MI 49016

Purpose of Disbursement
Contribution

Candidate Name
Mark Hamilton Schauer

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 07

Transaction ID: D2234

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)
UDALL FOR COLORADO INC

Mailing Address 8690 Wolff Court #200

City State Zip Code
Westminster CO 80031

Purpose of Disbursement
Contribution

Candidate Name
Mark Udall

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District:

Transaction ID: D2239

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

70000.00